

DAVID N. CICILLINE
Mayor

THOMAS M. BRADY
Superintendent



Providence Public School District
Office of the Superintendent
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OFFICE OF SUPERINTENDENT

Date: _____

Dear Parents/Guardians of _____:

Congratulations! I am writing to inform you that your child is now *reading at his/her grade level*. Because of your child's hard work, the efforts of the classroom teacher, and your support, your child will no longer require a Personal Literacy Plan.

Please schedule a meeting with the contact person listed below to discuss your child's success and to have you acknowledge your child's accomplishment by signing the release section of the Personal Literacy Plan.

Thank you for supporting your child to strengthen his/her reading skills and helping to ensure his/her academic success.

Sincerely,

A handwritten signature in black ink that reads "Thomas M. Brady".

Thomas M. Brady
Superintendent

Contact Person: _____

School/Phone: _____